

EASTERN CONNECTICUT STATE UNIVERSITY

83 WINDHAM STREET • WILLIMANTIC, CONNECTICUT 06226 • 860-465-5000

Office of Financial Aid **2016-2017 Child Support Paid Worksheet**

PURPOSE

On your Free Application for Federal Student Aid (FAFSA) and/or your Verification Worksheet, you indicated that you or a member(s) of your household paid child support during the 2015 calendar year (January 1, 2015 – December 31, 2015). As part of the verification process, you must provide details below about these payments.

INSTRUCTIONS

This from must be completed and returned to the Financial Aid Office within (10) business days. We cannot continue processing your request for financial aid until this information is received. If you have any questions, contact the office at financialaid@easternct.edu or by calling (860) 465-5205. A member of the client services staff will assist you.

A. Student Information					
Name:		Eastern ID:			
B. Check the Box that Ap	plies:				
A. I (the student) or my during the 2015 calendar	y spouse (if married) who is a year.	member of the student's house	hold paid	d child supp	oort
B. My Parent(s) included in the household paid child support during the 2015 calendar year. (Dependent Students Only)					
C. Neither I, my spouse 2015 calendar year.	(if married), nor my parents' (if y	ou're a dependent student) paid	child sup	port during	the
If choices A or B were checked, p	elease complete the section below	w.			
Name of Person Who Paid Child Support	Name of Person to Whom Child Support was Paid	Name of Child for Whom Support Was Paid	Child's Age	S Amount of Child Support Paid in 2015	
Note: If we have reason to believe that the information regarding child support paid is not accurate, we may require additional documentation such as: A copy of the separation agreement or divorce decree that shows the amount of child support to be provided, A statement from the individual receiving the child support certifying the amount of child support received, or Copies of the child support payment checks or money order receipts.					
Certification and Signatures Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and one parent must sign and date.		WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.			
Student's Printed Name		Student Signature			Date
Printed Parent Name (Required for	Parent Signature (Required for Dependent Student) Date			Date	